INNOVENTION CNTS

RECEIVED CENTRAL FAX CENTER

MAY 10 2005

FAX TRANSMISSION

To: Post Issue Fax #: (703) 872- 9306 Phone #: (_) -

From: Dale Fiene Fax #: 847-658-4323 Phone #: 847-658-5617

Sheets Transmitted: \(\frac{3}{3} \) including this sheet \(\text{Date: } \frac{5/10/05}{} \)

Subject: CHANGE OF CORRESPONDENCE ADDRESS FOR PATENT #5

5,491,160 5,479,074 5,471,118 5,446,347 5,432,409 5,416,386 5,404,083 5,404,083 5,407,043 5,371,441 5,214,356 5,189,342

5,180,952



PTO/SB/123 (09-04)
Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

CHANGE OF **CORRESPONDENCE ADDRESS** Patent

Address to: Mail Stop Post Issue Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Under the Paperwork Reduction Act of 1995, no persons an	e required to respond to a coffection	on of information unless it displays a valid OMB control nu	mber.
CHANGE OF CORRESPONDENCE ADDRESS Patent	Palent Number	5,180,952	
	Issue Date	1/19/1993	
	Application Number	931,086	
address to: fail Stop Post Issue commissioner for Patents I.O. Box 1450 llexandria, VA 22313-1450	Filing Date	2/7/1992	
	First Named Inventor	Ole K. Nilssen	
	Attorney Docket Number		

Please change the Correspondence Address for the above-in	Sentified patent to:				
The address associated with Customer Number:]			
OR L					
Firm or Individual Name Ole K. Nilssen					
Address 200 N. Harrison St., Suite 103					
city Algonquin	State IL	ZIP 60102			
Country United States of America					
Telephone 847-658-5615	Fax 847-658-4323				
This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124). This form will not affect any "fee address" provided for the above-identified patent. To change a "fee address" use the "Fee Address Indication Form" (PTO/SB/47).					
I am the:					
Patentee.					
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
Attorney or agent of record. Registration Number					
Signature UNITE					
Typed or Printed Name Ole K. Nilssen					
V 1 1	Telephone 847-	658-5615			
NOTE: Signatures of all the inventors or assignees of record of the e	Telephone Telephone Telephone	re required. Submit multiple forms			
if more than one signature is required, see below.					
*Total offorms are submitted.					

This collection of Information is required by 37 CFR 1.33. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed explication form to the USPTO. Time will vary depending upon the industry case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent end Trademark Office, U.S. Department of Commence, P.O. Box 1450, Alexandria, VA. 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Post Issue, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.